# HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS (LONG FORM)

NAME (Last, First, Middle)

Sekiguchi, Brian Hiroshi

STATE POSITION HELD: (Dept/Div or Board/Commission)

Department of Transportation

TERM OF OFFICE (Begin/End):

11/01/03 / open

FOR EACH ITEM, EXCEPT ITEM 9, DISCLOSE INTERESTS OF FILER, SPOUSE, AND DEPENDENT CHILDREN. USE THE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the spouse and filer.

## ITEM 1: INCOME FOR SERVICES RENDERED FOR PRECEDING CALENDAR YEAR

List the source (the term "source" also includes any state or other government agencies) and amount of all income of \$1,000 or more received during the preceding calendar year, for services rendered, and the nature of the services rendered.

F,SP,DC,JT	NAME AND ADDRESS OF SOURCE OF INCOME	AMOUNT	SERVICES RENDERED
F	Department of the Navy ROICC Pearl Harbor PACNAVFACENGCOM Pearl Harbor, HI 96860	E	Contract Administration
F	Ampac Properties, Ltd. 98-020 Kamehameha Highway Aiea, HI 96701	В	Real Estate
SP	Department of the Navy ROICC Pearl Harbor PACNAVFACENGCOM Pearl Harbor, HI 96860	E	Procurement
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]Check here if entry is None

[ ]Check here if additional sheets are attached

## ITEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List the amount and identity of every ownership or beneficial interest held during the disclosure period in any business incorporated, regulated, or licensed to carry on business in the State if the interest has a value of \$5,000 or more or is equal to 10% or more of the ownership of the business.

F,SP, DC,JT	BUSINESS NAME AND ADDRESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES
JT	CHSS LLC 98-836 Leialii Street Aiea, HI 96701	Real Estate	100% TE	Н
		.`		

1Check here if entry is None

[ ]Check here if additional sheets are attached

## ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List any ownership or beneficial interests in businesses transferred during the disclosure period and the date of transfer.

F,SP, DC,JT	OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD	DATE OF TRANSFER
[ X]Ched	ck here if entry is None [ ]Check here if additiona	I sheets are attached

#### **ITEM 4: CREDITORS**

List the name and address of each creditor to whom the value of \$3,000 or more was owed during the disclosure period and the original amount and amount outstanding (excluding debts arising out of retail transactions or the purchase of consumer goods).

F,SP, DC,JT	NAME OF CREDITOR AND ADDRESS	ORIGINAL AMOUNT OWED	AMOUNT OUTSTANDING
JT	Washington Mutual P.O. Box 60800 Los Angeles, CA 90060-0800	Н	н
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## ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS

List every officership, directorship, trusteeship, or other fiduciary relationship held during the disclosure period in any business or organization, the term of office, and the annual compensation.

F,SP, DC,JT	NAME AND ADDRESS OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION
F	APWA c/o HECO P.O. Box 2750 Honolulu, HI 96840	Vice President	1/03 - present	A
F	Hickam Federal Credit Union P.O Box 30025 Honolulu, HI 96820	Supervisory Committee	3/86 - 11/03	A
F	Aiea Little League 98-404 Kilihea Way Aiea, HI 96701	Board of Directo	rs 2/99 - present	А
[ ]Check here if entry is None [ ]Check here if additional sheets are attached				

[ ]Check here if additional sheets are attached

[ ]Check here if entry is None

#### ITEM 6: INTERESTS IN REAL PROPERTY HELD IN THE STATE

	TIEM O. MILEUSIS IN REAL PROPERTY RELED IN THE STATE						
List interes	st interests in real property in the State, held during the disclosure period, if the interest has a value of \$10,000 or more.						
F SP	STREET ADDRESS		•		TAX MAP KEY NUMBER	VALUE	

F,SP, DC,JT	STREET ADDRESS	TAX MAP KEY NUMBER	VALUE
JT,	98-836 Leialii Street	980680290000	ı

## ITEM 7: INTERESTS IN REAL PROPERTY ACQUIRED

List interests in real property in the State, acquired during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP, DC,JT	TAX MAP KEY NUMBER & STREET ADDRESS	AMOUNT & NATURE OF CONSIDERATION PAID	NAME OF PERSON RECEIVING THE CONSIDERATION
[X]Chec	ck here if entry is None	[ ]Check here if a	dditional sheets are attached

# ITEM 8: INTERESTS IN REAL PROPERTY TRANSFERRED

List interests in real property in the State, transferred during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP, DC,JT	TAX MAP KEY NUMBER & STREET ADDRESS	AMOUNT & NATURE OF CONSIDERATION RECEIVED	NAME OF PERSON FURNISHING THE CONSIDERATION

[X]Check here if entry is None

[ ]Check here if additional sheets are attached

### ITEM 9: CLIENTS PERSONALLY REPRESENTED BEFORE STATE AGENCIES

List the names of clients personally represented by you before state agencies, except in ministerial matters, for a fee or compensation during the disclosure period, excluding clients represented before courts.

NAME OF CLIENT	NAME OF STATE AGENCY
*	
∑]Check here if entry is None	[ ]Check here if additional sheets are attached

#### ITEM 10: CREDITOR INTERESTS IN INSOLVENT BUSINESSES

List the amount and identity of every creditor interest in insolvent businesses, held during the disclosure period, if the interest has a value of \$5,000 or more.

F,SP,DC,JT	NAME AND ADDRESS OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE
			STATE OF HAWAII	RECEIVED
[ x]Check here if entry is None [ ]Check here if additional sheets are a				are attached

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.

m H. Scharl

1/5/04 DATE